

PTO/SB/30 (04-05)
Approved for use through 07/31/2006. OMB 0651-0031
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Request	Application Number	10/622,268-Conf. #4219			
For Continued Examination (RCE)	Filing Date	July 17, 2003 Yuichi Ise			
Transmittal	First Named Inventor				
Address to: MS RCE	Art Unit	2629			
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Examiner Name	P. M. Dharia			
	Attorney Docket Number	09475/000M770-US0			
This is a Request for Continued Examination (RCE) under Request for Continued Examination (RCE) practice under 37 CFf 8, 1995, or to any design application.		• •			
Submission required under 37 CFR 1.114 Note: If amendments enclosed with the RCE will be entered in the applicant does not wish to have any previously filed unente amendment(s).	order in which they were filed un	less applicant instructs otherwise. If			
a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.					
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on					
ii. Other					
b. X Enclosed					
i. X Amendment/Reply ii	i. X Information Disclosur	e Statement (IDS)			
ii. Affidavit(s)/Declaration(s) iv. x Other PTO/SB/08 Form; 3 References					
2. Miscellaneous					
a. Suspension of action on the above-identifie	, ,	· ·			
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)					
b. Other					
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.					
a The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. 04-0100 . I have enclosed a duplicate copy of this sheet.					
i. X RCE fee required under 37 CFR 1.17(e)					
ii. Extension of time fee (37 CFR 1.136 and 1.17)					
iii. Other					
b. X Check in the amount of \$790.	00 enclosed				

	SIGNATURE OF APPLICANT, ATT	ORNEY, OR AGENT	REQUIR	ED
Signature	Stock	Date	July 6,	2006
Name (Print/Type)	Thomas J. Bean	Registr	ation No.	44,528

07/11/2006 HDESTA1 00000086 10622268

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790.00 OP

Express Mail Label No.	Dated:	

Payment by credit card (Form PTO-2038 enclosed)

PTO/SB/17 (01-06)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known					
FEE TRANSMITTAL		Appli	7.55		10/622,268-C	,268-Conf. #4219		
		Filing	Filing Date July 17,		July 17, 2003	y 17, 2003		
For	For FY 2006		First	First Named Inventor Yuichi Ise		Yuichi Ise		
			Exan	niner Name		P. M. Dharia	aria	
Applicant claims sma	Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2629				
TOTAL AMOUNT OF PA	OTAL AMOUNT OF PAYMENT (\$) 790.00 Attorney Docket No. 09475			09475/000M7	70-US0			
METHOD OF PAYME	NT (check all th	at apply)				_		
X Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.								
For the above-ide	ntified deposit a	ccount, the Directo	r is hereb	y authorize	ed to: (che	eck all that apply)	
Charge fee(s) indicated belo	ow		Charg	e fee(s) ir	ndicated below, e	except for t	he filing fee
	additional fee(s r 37 CFR 1.16 a) or underpayment and 1.17	of	x Credit	any over	payments		
FEE CALCULATION	All the fees t	elow are due u	oon filin	g or may	be subj	ect to a surch	arge.)	
1. BASIC FILING, SEARC	_							
			SEARCH		EXAM	NATION FEES	3	
Application Type	Fee (\$)	Small Entity Fee (\$) Fee	· (\$)	nall Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees I	Paid (\$)
Utility	300		00	250	200	100		
Design	200		00	50	130	65		
Plant	200		00	150	160	80		
Reissue	300		00	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES				•				Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (inclu							50	25
Each independent claim of		g Reissues)					200	100
Multiple dependent claim	S					_	360	180
			e Paid (\$	<u>) </u>	-	Multiple Depend		
7 - 20 =	0 x	0 =			Ē	ee (\$)	Fee Paid (<u> </u>
HP = highest number of total of			o Baid (4	1		 -		_
Indep. Claims Extr	a Claims Fo	ee (\$) = Fe 0 =	e Paid (\$	<u>'L</u>				
HP = highest number of indep								
3. APPLICATION SIZE F		, ,						_
If the specification and of listings under 37 CFF	drawings exceed							0
sheets or fraction the	reof. See 35 U.							
Total Sheets	Extra Sheets	Number of eac					<u>Fee</u>	<u>Paid (\$)</u>
		/50	(100110	l up to a whe	ole numbel	,	Fees	Paid (\$)
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00								
SUBMITTED BY	X011-		Regist	ration No.	AA 529	Telephone	(212) F2	7-7700
Signature	Sheld			ey/Agent)	44,528		(212) 52	
Name (Print/Type) Thomas	ਤ ਹੈ. Bean					Date	July 6,	2006

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